

# Iowa Department of Human Services

# Life in the Community for Everyone

Olmstead Plan Framework 2016-2020

# **Olmstead Plan Framework 2016-2020**

# Life in the Community for Everyone

**INTRODUCTION:** The Department of Human Services (DHS) is committed to actions, opportunities, and efficiencies that promote the vision of "Life in the Community for Everyone." This document provides a framework for community living built on nine outcome goals. To accomplish these goals DHS will work with service recipients, families, advocates, MHDS Regions, providers, state agencies, and other stakeholders to address barriers and improve access to community living.

The nine **OUTCOME GOALS** are "big picture" statements that describe the positive life experiences that should be available to lowans with disabilities and mental illnesses. Each of nine outcome goal areas have four components that will help guide you through the information contained in this document:

- 1. **OBJECTIVES** are specific "pieces" that come together to form the big picture. Considered together, these objectives in each of nine areas of community living define "where we want to be." Each of the nine goals also identifies a "priority area of focus," which is recognized as needing attention.
- 2. PROGRAMS, ACTIVITIES & POLICIES are specific actions being implemented to achieve measureable progress toward the outcome goals and objectives. These include programs and policies managed by DHS or other state agencies, and activities of other organizations that support the vision of life in the community for everyone. These describe "what we are doing to make progress." Each of these activities is more fully described in an accompanying document (or through links within this document when in electronic form) to provide more detailed information about what it is, who is responsible for making it happen, the expected timeline, and how it is funded.
- 3. **INDICATORS OF PROGRESS** are the types of information that will be gathered and reviewed at least annually to measure progress toward the outcome goals and objectives. These are the questions we are going to ask. They include data that can be collected through systems (things we can count) and through gathering the opinions of individuals with disabilities and mental illnesses and their families through experience surveys. These describe "how we can tell we are getting there."
- 4. LINKS TO DATA SOURCES reports on the indicators of progress. This column contains links to reports, websites, and other information that describes "where we are now." In this way, as new data is collected and made available, you will be able to review it and see how we have progressed toward the outcome goals.

# **Olmstead Plan Framework 2016-2020**

### WHERE WE WANT TO BE:

OUTCOME GOALS & OBJECTIVES



PROGRAMS, ACTIVITIES & POLICIES



# HOW WE CAN TELL WE ARE GETTING THERE:

INDICATORS
OF PROGRESS



# WHERE WE ARE NOW:

LINKS TO DATA SOURCES





# **OUTCOME GOALS**

1.	ACCESS TO SERVICES:	Individuals with disabilities and mental illnesses have timely and convenient access to services and supports that are responsive to their needs and preferences, and are provided by a qualified, well-trained, and supported workforce.
2.	LIFE IN THE COMMUNITY INTEGRATION:	Individuals with disabilities and mental illnesses are valued, respected, and active members of their communities.
3.	LIFE IN THE COMMUNITY EMPLOYMENT:	Children with disabilities and mental health conditions are appropriately educated in integrated settings. Adults with disabilities and mental illnesses are employed in integrated settings of their choice, earning competitive wages and benefits. Older adults with disabilities and mental illnesses engage in meaningful activities of their choice.
4.	LIFE IN THE COMMUNITY HOUSING:	Individuals with disabilities and mental illnesses live in integrated settings of their choice that are safe, decent, affordable, and accessible.
5.	LIFE IN THE COMMUNITY TRANSPORTATION:	Individuals with disabilities and mental illnesses have adequate transportation to get to the places they need and want to go.
6.	PERSON- CENTEREDNESS:	Individuals with disabilities and mental illnesses are supported and empowered to make informed choices about their personal goals, daily activities, individualized service plans, and civic involvement.
7.	HEALTH AND WELLNESS:	Individuals with disabilities and mental illnesses receive quality health care and are supported in living healthy lives.
8.	QUALITY OF LIFE AND SAFETY:	Individuals with disabilities and mental illnesses are safe, free from all forms of neglect and mistreatment, and are empowered to improve their quality of life.
9.	FAMILY AND NATURAL SUPPORTS:	Individuals with disabilities and mental illnesses are supported by family members and friends of their choice, and have social connections within their communities.

# **ACCESS TO SERVICES**

Individuals with disabilities and mental illnesses have timely and convenient access to services and supports that are responsive to their needs and preferences, and are provided by a qualified, well-trained, and supported workforce.

### **OBJECTIVES FOR ACCESS TO SERVICES:**

- Individuals have the information, skills, and support they need to access disability-related services and supports.
- Individuals have meaningful choices in selecting services and service providers.
- Services and supports are available timely and within reasonable proximity.
- Services and supports meet quality standards, are effective, and resources are used efficiently.
- Services and supports are provided by qualified, well-trained, and adequately supported individuals.

PRIORITY AREA OF FOCUS: Provider & Workforce Capacity - coordinated activities to increase provider workforce skills and competencies to serve individuals with interfering behavior, multi-occurring conditions, and complex health needs, and support workforce retention and growth.

# PROGRAMS, ACTIVITIES, AND **POLICIES**

### **Community Capacity Building Activities:**

- CHILDREN'S SERVICES Plan and implement a children's mental health services system, starting with mental health crisis and wellbeing based on workgroup recommendations and legislation
- CRISIS SERVICES Mental Health and Disability Services (MHDS) regional expansion of comprehensive crisis response services and crisis beds
- BEHAVIOR ANALYST GRANTS Iowa Department of Public Health (IDPH) Board Certified Behavior Analyst (BCBA) and Board Certified Assistant Behavior Analyst (BCaBA) Grants Program
- CORE PLUS SERVICES Mental Health and Disability Services (MHDS) regional expansion of "core plus" services (crisis services, subacute, mental health courts, jail diversion programs, and intensive post-release service coordination)
- ASSERTIVE COMMUNITY TREATMENT (ACT) Expansion of ACT teams and use of similar team approach designed for persons with intellectual disabilities
- TELEHEALTH Expanded use of telehealth by Medicaid and other funders
- COMPLEX NEEDS Develop and implement recommendations on access to and coordination of mental health, disability, and substance use disorder services, particularly for individuals with complex needs

# **ACCESS TO SERVICES** (continued)

# PROGRAMS, ACTIVITIES, AND POLICIES (continued)

### **Information & Service Coordination Activities:**

- CASE MANAGEMENT Implementation of community based case management for long term services and supports
- INTEGRATED HEALTH HOMES Implementation of Integrated Health Homes Programs (IHH) statewide
- MHDS REGIONAL COMPETENCES MHDS Regional services delivered with co-occurring, evidence based, and trauma-informed competences
- BED TRACKING Carematch psychiatric bed tracking system
- PERSON CENTERED PLANNING Home and Community Based Services (HCBS) Waiver Services Person Centered Planning
- NURSING FACILITY SCREENING Preadmission Screening and Resident Review Program (PASRR)
- NO WRONG DOOR Iowa Department on Aging (IDA) Life Long Links "no wrong door" system of access

### **Training Activities:**

- PROVIDER TRAINING Iowa Association of Community Providers (IACP) web-based Home and Community Based Services (HCBS) Provider Training and Technical Assistance
- PREPARE TO CARE DIRECT SERVICE TRAINING Iowa Care Givers Association Prepare to Care competency-based training for direct service professionals
- PEER & FAMILY PEER SUPPORT University of Iowa Peer Support & Family Peer Support Training Program
- RECIDIVISM REDUCTION Department of Corrections (DOC) Second Chance Act Statewide Recidivism Reduction Grant training
- PRE-SERVICE TRAINING University of Iowa Pre-Service Training for Health Professionals
- PRIMARY HEALTH CARE PROVIDER TRAINING Medicaid and University of Iowa Primary Health Care Provider training

	INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:
DATA COLLECTED		MHDS Regional Annual Reports
• •	I Health and Disability Services (MHDS) Regions that meet all 14 cess standards [RSD]	http://dhs.iowa.gov/mhds-providers/providers- regions/regions/annual-reports

ACCESS TO SERVICES (continued)		
proportion of MHDS Regions providing the core plus service of Residential Crisis Beds [RSD]	MHDS Regional Service Data <a href="http://dhs.iowa.gov/mhds-providers/providers-">http://dhs.iowa.gov/mhds-providers/providers-</a>	
proportion of MHDS Regions providing the core plus service of Mobile Crisis Response [RSD]	regions/regions/list  MHDS Outcomes and Performance Measures (OPM):	
proportion of MHDS Regions providing the core plus service of Jail Diversion [RSD]	Regional Dashboard	
proportion of MHDS Regions providing the core plus service of Assertive     Community Treatment [RSD]	Link to information under construction	
<ul> <li>proportion of MHDS Regions offering identified evidence based practices (Iowa Administrative Code Chp. 25) [RSD]</li> </ul>		
<ul> <li>proportion of the state where regional "core plus" crisis, subacute, jail diversion, mental health courts, or intensive post-release care coordination services are available [RSD]</li> </ul>		
<ul> <li>number of individuals on Home and Community Based Services (HCBS) Waiver waiting lists by waiver [IAHLink]</li> </ul>	Iowa Department of Human Services, Iowa Medicaid Enterprise Monthly Slot and Waiting List Summary <a href="http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/waivers">http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/waivers</a> (scroll down and click on HCBSC Waiver Waiting List Information)	
<ul> <li>proportion of individuals with an intellectual disability who meet ICF/ID level of care who are living in intermediate care facilities for persons with intellectual disabilities (ICF/IDs) [IAHLink]</li> </ul>		
<ul> <li>proportion of individuals with intellectual disability who meet ICF/ID level of care being served on the HCBS Intellectual Disability Waiver [IAHLink]</li> </ul>	Iowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports)	
proportion of individuals with a primary behavioral health diagnosis that use inpatient psychiatric hospital services [IAHLink]	http://dhs.iowa.gov/ime/about/performance-data	
<ul> <li>proportion of children with a primary behavioral health diagnosis served in a Psychiatric Medical Institution for Children (PMICs) per year [IAHLink]</li> </ul>		
PERSONAL EXPERIENCE QUESTIONS:	Iowa Participant Experience Survey (IPES), Iowa Medicaid Enterprise	
Are you using your approved services? [IPES Q410]	Link to information under construction	
Did you decide to use your current service providers? [IPES Q408-1]		
Is it easy to make contact with service staff? [IPES Q407]		

# LIFE IN THE COMMUNITY - INTEGRATION

Individuals with disabilities and mental illnesses are valued, respected, and active members of their communities.

### **OJECTIVES FOR COMMUNITY INTEGRATION:**

- Individuals have the information, skills, and support they need to effectively participate in community life.
- Individuals are recognized as valued, respected, and active members of their communities.
- Individuals are included in their communities and participate in activities of their choice.
- Individuals have regular interactions with persons who do not have disabilities and who are not paid staff.

PRIORITY AREA OF FOCUS: Policies Supporting Community Access - coordinated activities bring all community-based services into full compliance with the HCBS (Home and Community Based Services) Settings rules

# PROGRAMS, ACTIVITIES, AND POLICIES

# **Community Transition Activities:**

- INTEGRATED SETTINGS HCBS (Home and Community Based Services) Settings Rule transition and implementation
- COORDINATED TRANSITION SUPPORTS Money Follows the Person (MFP) Grant program
- BEHAVIORAL SUPPORT Iowa Technical Assistance and Behavior Support (I-TABS) Program
- AUTISM RESOURCES Woodward State Resource Center Autism Resource Team
- OPTIONS COUNSELING MDS (Minimum Data Set) Section Q Options Counseling
- SRC CENSUS REDUCTION Planned annual census reduction for State Resource Centers (SRCs)
- I-START CSS Region prevention and intervention services for individuals with ID/DD and complex behavioral needs

### **Information & Training Activities:**

- MENTAL HEALTH FIRST AID (MHFA) and Youth Mental Health First Aid training
- POST-SECONDARY TRANSITION PLANNING Department of Education (DE) Transition Planning for Youth in Special Education

# LIFE IN THE COMMUNITY – INTEGRATION (continued)

LIFE IN THE COMMONTY - INTEGRATION (continued)		
INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:	
DATA COLLECTED:	Iowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports)	
<ul> <li>number of members approved for Nursing Facility, Intermediate Care Facility for Individuals with Intellectual Disabilities, Skilled, and Hospital Levels of Care (by LOC) served in facilities [IAHLink]</li> </ul>	http://dhs.iowa.gov/ime/about/performance-data	
<ul> <li>number and proportion of members approved for Nursing Facility, Intermediate Care Facility for Individuals with Intellectual Disabilities, Skilled, and Hospital Levels of Care (by LOC) served in community settings [IAHLink]</li> </ul>		
PERSONAL EXPERIENCE QUESTIONS:	Iowa Participant Experience Survey (IPES), Iowa Medicaid Enterprise	
Do you feel you get to choose the things you want to do in your life? [IPES Q515]	link to information under construction	

# LIFE IN THE COMMUNITY - EMPLOYMENT

Children with disabilities and mental health conditions are appropriately educated in integrated settings.

Adults with disabilities and mental illnesses are employed in integrated settings of their choice, earning competitive wages and benefits. Older adults with disabilities and mental illnesses engage in meaningful activities of their choice.

### **OBJECTIVES FOR COMMUNITY EMPLOYMENT:**

- Children are engaged in appropriate early childhood or individualized educational services and supports in their local schools.
- Transition age youth and young adults are engaged in skill building and training to prepare for competitive employment and independent living.
- Individuals of any age can choose to engage in lifelong learning activities.
- Individuals have the information, skills, and support they need to effectively secure and maintain employment.
- Individuals are employed (or self-employed) in settings where the majority of employees do not have disabilities and they are fully integrated with co-workers, customers, vendors, and others to the same extent as workers without disabilities.
- Individuals are employed in jobs of their choice.
- Individuals earn minimum wage or above and receive wages and benefits comparable to persons without disabilities doing the same work.
- Older adults choose when to retire and are engaged in meaningful activities of their choice after retirement.

### **PRIORITY AREA OF FOCUS:**

**Integrated and Competitive Employment** - coordinated activities to move individuals beyond pre-vocational work activities and increase participation in integrated and competitive employment

# PROGRAMS, ACTIVITES, AND POLICIES

# **Statewide Employment Activities:**

- COMPETITIVE EMPLOYMENT Coordinated DHS and Iowa Vocational Rehabilitation Services (IVRS) initiatives to increase the number of individuals with disabilities who are competitively employed
- MEDICAID EMPLOYMENT SERVICES Implementation of new rules for redesigned Medicaid employment services

### **Information & Training Activities:**

- SUPPORTED EMPLOYMENT TRAINING
- CUSTOMIZED EMPLOYMENT TRAINING
- POSTSECONDARY TRANSITION PROJECT Department of Education (DE) & ASK Resource Center Postsecondary Transition Project

### **Work Incentive & Asset Development Activities:**

- WORK INCENTIVES Benefits planning and Social Security work incentives, and community work incentive coordinators
- WORKFORCE INNOVATION Iowa Vocational Rehabilitation Services (IVRS) Workforce Innovation and Opportunity Act (WIOA) implementation

# LIFE IN THE COMMUNITY - EMPLOYMENT (continued)

LIFE IN THE COMMUNITY - EMPLOYMENT (continued)		
INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:	
DATA COLLECTED:	Iowa Department of Education State Performance	
<ul> <li>proportion of children with Individualized Education Programs (IEPs) ages 3-5 who attend a regular early childhood education program [IDEA page 31]</li> </ul>	Report for IDEA Part B (July 18, 2016) (for FFY 2014) https://www.educateiowa.gov/documents/special-	
<ul> <li>proportion of children with IEPs who are in the regular classroom 80% or more of the day [IDEA page 29]</li> </ul>	education/2016/07/iowa-part-b-annual-performance-report-ffy-2014	
<ul> <li>proportion of youth aged 16 and over with IEPs that include appropriate measurable postsecondary goals, transition services, and courses of study [IDEA page 49]</li> </ul>		
<ul> <li>proportion of youth with IEPs who graduate from high school with a regular diploma [IDEA page 6]</li> </ul>		
proportion of child members with SED who attended school regularly [IAHLink]	Employment First, Iowa Coalition for Integrated Employment (ICIE) Employment Outcomes Data	
<ul> <li>proportion of working age (18-64) adults with disabilities who are employed [E1st online]</li> </ul>	Collection Pilot Report (April 2016) <a href="http://employmentfirst.leadcenter.org/iowa">http://employmentfirst.leadcenter.org/iowa</a>	
number and proportion of individuals receiving HCBS Waiver and Habilitation services who are competitively employed [IAHLink]	Iowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports)	
proportion of working age individuals served on the Intellectual Disabilities Waiver who are employed or self-employed in integrated settings [IAHLink]	http://dhs.iowa.gov/ime/about/performance-data	
average hours worked in a 2-week period for individuals who are employed [IAHLink]		
average wages earned in a 2-week period for individuals who are employed [IAHLink]		
average hourly earnings for individuals who are employed [IAHLink]		
HCBS members who are not employed and report they are involved in meaningful integrated day activities [IAHLink]		

### LIFE IN THE COMMUNITY - HOUSING

Individuals with disabilities and mental illnesses live in integrated settings of their choice that are safe, decent, affordable, and accessible.

### **OBJECTIVES FOR COMMUNITY HOUSING:**

- Individuals have the information, skills, and support they need to effectively secure and maintain community housing.
- Individuals live in integrated community settings of their choice with the supports they need.
- Children live in their family homes with the supports they need.
- Older adults have the supports they need to age in place.
- Individuals have meaningful choices in where and with whom they live.
- Individuals live in housing that is safe, affordable, and accessible.

PRIORITY AREA OF FOCUS: Housing Resources and Availability - coordinated activities to increase access to safe, affordable, and accessible housing.

# PROGRAMS. **ACTIVITIES.** AND **POLICIES**

### **Housing Access Activities:**

- RENT SUBSIDIES Iowa Finance Authority (IFA) HCBS Rent Subsidy Program
- HOUSING DATABASE IFA lowahousingsearch.org
- TAX CREDITS IFA Low Income Housing Tax Credit Program

### **Activities to Keep People in Their Homes:**

- PACE (Program of All Inclusive Care for the Elderly)
- HOME MODIFICATION Home Modification Tax Credit Proposal

### **Activities to Reduce Homelessness:**

- PATH (Projects for Assistance in Transition from Homelessness)
- SOAR (SSI/SSDI Outreach, Assistance and Recovery Program)
- PERMANENT SUPPORTIVE HOUSING (an Evidence Based Practice)

LIFE IN THE COMMUNITY - HOUSING (continued)		
INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:	
DATA COLLECTED:	Iowa Homeless Point in Time Count, Institute for Community Alliances	
proportion of individuals experiencing homelessness [laHPinTime]	https://www.icalliances.org/iowa-data-and-reports/	
<ul> <li>proportion of individuals experiencing homelessness who have a severe disability [IaHPinTime]</li> </ul>		
PERSONAL EXPERIENCE QUESTIONS:	Iowa Participant Experience Survey (IPES), Iowa Medicaid Enterprise	
Do you feel safe where you live? [IPES Q463]	link to information under construction	
Do you feel safe with the people you live with? [IPES Q462]		

# **OUTCOME** GOAL #5

# LIFE IN THE COMMUNITY - TRANSPORTATION

Individuals with disabilities and mental illnesses have adequate transportation to get to the places they need and want to go.

### **OBJECTIVES FOR COMMUNITY TRANSPORTATION:**

- Individuals have the information, skills, and support they need to find and use transportation in their community.
- Individuals are able to get to the places they need to go.

PRIORITY AREA OF FOCUS: Transportation Access - coordinated activities to increase access to transportation services that support full community integration

# PROGRAMS, **ACTIVITIES**, AND **POLICIES**

### **Transportation Access Activities:**

- MOBILITY MANAGEMENT SERVICES Department of Transportation (DOT) statewide mobility management services
- NEMT Non-Emergency Medical Transportation through Medicaid
- HCBS WAIVER funded Transportation Services

# PERSON-CENTEREDNESS

Individuals with disabilities and mental illnesses are supported and empowered to make informed choices about their personal goals, daily activities, individualized service plans, and civic involvement.

### **OBJECTIVES FOR PERSON-CENTEREDNESS:**

- Individuals have the information, skills, and support they need to effectively engage in service planning, civic activities, and informed decision making.
- Individuals exercise the rights and responsibilities of citizenship and participate in public policy advocacy, development, and evaluation.
- Individuals are involved in service planning, service management, service evaluation, and choosing their own support network.
- Service plans reflect and support the individual's personal goals, cultural identity, housing and employment preferences, and personal lifestyle choices.

PRIORITY AREA OF FOCUS: Informed Choice - coordinated activities to infuse person-centered principles and practices into all areas of service planning and delivery.

# PROGRAMS. ACTIVITIES, AND **POLICIES**

### **Information and Training Activities:**

- CONSUMER INPUT Office of Consumer Affairs (OCA)
- PUBLIC GUARDIANSHIP Office of Substitute Decision Maker
- ALTERNATIVES TO GUARDIANSHIP Iowa Legal Aid informational materials
- GUARDIANSHIP REVEW Iowa Supreme Court Guardian and Conservatorship Task Force
- CIVIC ENGAGEMENT DD Council Projects: IDAction, InfoNET, and Make Your Mark Self-Advocacy Conference
- SELF-DIRECTION and Support Broker Training

### **Self-Direction Activities:**

- CONSUMER DIRECTION Consumer Directed Attendant Care and Consumer Choices Option
- PEER SUPPORT AND FAMILY PEER SUPPORT SERVICES

# **PERSON-CENTEREDNESS** (continued)

LINKS TO DATA SOURCES:
lowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports) <a href="http://dhs.iowa.gov/ime/about/performance-data">http://dhs.iowa.gov/ime/about/performance-data</a>
owa Participant Experience Survey (IPES), owa Medicaid Enterprise
Link to information under construction

### **HEALTH AND WELLNESS**

Individuals with disabilities and mental illnesses receive quality health care and are supported in living healthy lives.

### **OBJECTIVES FOR HEALTH AND WELLNESS:**

- Individuals have the information, skills, and support they need to work with health care providers and make health care choices.
- Individuals receive quality physical and mental health care services.
- Individuals direct and manage their health care services.
- Individuals live healthy lives and have the knowledge, resources, and supports needed to maintain their wellness.

PRIORITY AREA OF FOCUS: Coordinated Health Care - Increase access to information, resources, and care coordination

# PROGRAMS, ACTIVITES, AND POLICIES

### **Mental Health Awareness and Recovery Activities:**

- FIRST EPISODE Department of Education's (DE) Recovery After an Initial Schizophrenia Episode (RAISE) grant from SAMHSA (Substance Abuse and Mental Health Services Administration) and NAVIGATE treatment program
- SUICIDE PREVENTION Iowa Department of Public Health's (IDPH) Iowa Plan for Suicide Prevention
- AWARENESS TRAINING Iowa Department of Education Advancing Wellness and Resilience Education Grant Program

### **Care Coordination Activities:**

- CASE MANAGEMENT Iowa HealthLink community based case management and health incentives
- CARE COORDINATION TEAMS Integrated Health Homes and Chronic Condition Health Homes

# **HEALTH AND WELLNESS (continued)**

HEALTH AND WELLINESS (Continued)		
INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:	
DATA COLLECTED:	Iowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports)	
number of adult Medicaid members with mental illness or developmental disabilities who receive at least one preventive ambulatory care visit a year [IHLink]	http://dhs.iowa.gov/ime/about/performance-data	
<ul> <li>proportion of Medicaid members with serious mental illness (SMI) who have care coordination for all aspects of their physical and mental health [IHLink]</li> </ul>	MHDS Regional Annual Reports <a href="http://dhs.iowa.gov/mhds-">http://dhs.iowa.gov/mhds-</a>	
number of individuals with SMI or SED (serious emotional disturbance) receiving mental health services through Medicaid funding [IHLink]	providers/providers- regions/regions/annual-reports	
number of individuals with SMI or SED receiving mental health services through MHDS Regional funding [RSD]	MHDS Regional Service Data <a href="http://dhs.iowa.gov/mhds-">http://dhs.iowa.gov/mhds-</a> providers/providers-regions/regions/list	
proportion of Medicaid members with SM or SED prescribed 2 or more specified psychotropic medications [IHLink]	MHDS Outcomes and Performance Measures (OPM): Regional Dashboard	
	Link to information under construction	

# **QUALITY OF LIFE AND SAFETY**

Individuals with disabilities and mental illnesses are safe, free from all forms of neglect and mistreatment, and are empowered to improve their quality of life.

### **OBJECTIVES FOR QUALITY OF LIFE AND SAFETY:**

- Individuals have the information, skills, and support they need to effectively advocate on quality of life issues.
- Individuals make their own life choices and understand and accept responsibility for reasonable risk and the consequences of their informed choices.
- Individuals feel safe and are safe in their homes and communities.
- Individuals are satisfied with their overall quality of life.

PRIORITY AREA OF FOCUS: Self-Determination - coordinated activities to increase informed decision-making by individuals and support them in making their own life choices

# PROGRAMS. ACTIVITIES, AND **POLICIES**

### **Safety & Preparedness Activities:**

- EMERGENCY PLANNING IDPH (Iowa Department of Public Health) Emergency Preparedness for People with Disabilities
- EMERGENCY PREP LEARNING University of Iowa Prepare Iowa Learning Management System
- DISASTER RESPONSE Disaster Behavioral Health Response Teams

### **Asset Development Activities:**

- IOWA ABLE FOUNDATION loan program
- ABLE ACCOUNTS (Achieving a Better Life Experience) Accounts and other asset development strategies

INDICATORS OF PROGRESS:	LINKS TO DATA SOURCES:
DATA COLLECTED:	Iowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and
proportion of members in HCBS (Home and Community Based Services) Waiver settings by population who are involved with major incidents [IAHLink]	annual reports) <a href="http://dhs.iowa.gov/ime/about/performance-data">http://dhs.iowa.gov/ime/about/performance-data</a>

QUALITY OF LIFE AND SAFETY (continued)		
<ul> <li>proportion of members in PMIC (Psychiatric Medical Institutions for Children) settings by population who are involved with major incidents [IAHLink]</li> </ul>		
PERSONAL EXPERIENCE QUESTIONS:	Iowa Participant Experience Survey (IPES), Iowa Medicaid Enterprise	
Has anyone hit or hurt you in any way in the past two years? [IPES Q470]	link to information under construction	

# OUTCOME GOAL #9

# **FAMILY AND NATURAL SUPPORTS**

Individuals with disabilities and mental illnesses are supported by family members and friends of their choice, and have social connections within their communities.

### **OBJECTIVES FOR FAMILY AND NATURAL SUPPORT:**

- Individuals have the information, skills, and support they need to effectively make choices about family and natural supports.
- Individuals make their own choices about family members or friends to be involved in service planning and decision making.
- Individuals develop natural relationships and feel they belong in their communities.
- Parents and families have adequate information and support to advise and advocate for their children or other family members.

PRIORITY AREA OF FOCUS: Access to Information and Resources - coordinated activities to increase information and resources available to individuals and their family members in navigating the services system and connecting with natural supports

# PROGRAMS, ACTIVTIES, AND POLICIES

### **Information & Networking Activities:**

- PEER SUPPORT AND FAMILY SUPPORT SERVICES
- FIND (Families of Iowa Network on Disabilities) online forum (ASK Resource Center)
- NATURAL SUPPORTS Support groups and community resources

### SOURCES OF INFORMATION:

Employment First, Iowa Coalition for Integrated Employment (ICIE) Employment Outcomes Data Collection Pilot Report (April 2016), <a href="http://employmentfirst.leadcenter.org/iowa">http://employmentfirst.leadcenter.org/iowa</a>

lowa Department of Education State Performance Report for IDEA Part B (July 18, 2016) (for FFY 2014) <a href="https://www.educateiowa.gov/documents/special-education/2016/07/iowa-part-b-annual-performance-report-ffy-2014">https://www.educateiowa.gov/documents/special-education/2016/07/iowa-part-b-annual-performance-report-ffy-2014</a>

lowa Department of Human Services, Iowa Medicaid Enterprise Monthly Slot and Waiting List Summary <a href="http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/waivers">http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/waivers</a> (scroll down and click on *HCBSC Waiver Waiting List Information*)

lowa Health Link Reports (Medicaid Managed Care monthly, quarterly, and annual reports) <a href="http://dhs.iowa.gov/ime/about/performance-data">http://dhs.iowa.gov/ime/about/performance-data</a>

Iowa Homeless Point in Time Count, Institute for Community Alliances <a href="https://www.icalliances.org/iowa-data-and-reports/">https://www.icalliances.org/iowa-data-and-reports/</a>

Iowa Participant Experience Survey, Iowa Medicaid Enterprise

MHDS Regional Annual Reports <a href="http://dhs.iowa.gov/mhds-providers/providers-regions/regions/annual-reports">http://dhs.iowa.gov/mhds-providers/providers-regions/regions/annual-reports</a>

MHDS Regional Service Data <a href="http://dhs.iowa.gov/mhds-providers/providers-regions/regions/list">http://dhs.iowa.gov/mhds-providers/providers-regions/regions/list</a>

MHDS Outcomes and Performance Measures (OPM): Regional Dashboard

SAMHSA Uniform Reporting System (Iowa 2015), <a href="https://www.samhsa.gov/data/sites/default/files/lowa.pdf">https://www.samhsa.gov/data/sites/default/files/lowa.pdf</a> (includes data on individuals with SMI or SED)

State of the States in Developmental Disabilities Projects, <a href="http://www.stateofthestates.org/documents/lowa.pdf">http://www.stateofthestates.org/documents/lowa.pdf</a>